

Petitioner's Docket No. 003252-052911

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Ulrich, Noth et al.  
Application No.: 10/082,705                      Group No.: 1636  
Filed: February 25, 2002                      Examiner: Maria Marvich  
For: TRABECULAR BONE-DERIVED HUMAN MESENCHYMAL STEM  
CELLS

**Commissioner for Patents**  
**P. O. Box 1450**  
**Alexandria, VA 22313-1450**

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3. Fee Transmittal Form (1pg);
4. Amendment (14 pp.);
5. Exhibit A (1pg);
6. References 1-3;
7. Drawings 1-5 (5pp);
8. Sequence Listing Disk;
9. Sequence Listing Paper Copy;
10. Sequence Listing Statement;
11. Petition for Three Month Extension of Time (1pg);
12. Limited Recognition under 37 CFR §10.9(b) (1pg);
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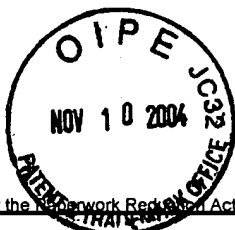
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Date: November 8, 2004

Kimberly A. Coyne  
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PTO/SB/21 (09-04)

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Total Number of Pages in This Submission

1

Application Number	10/082,705
Filing Date	February 25, 2002
First Named Inventor	Ulrich, Noth
Art Unit	1636
Examiner Name	Maria Marvich
Attorney Docket Number	003252-052911

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement under 37 CFR 10.9(b); Sequence Listing Disk; Sequence Listing Paper Copy; Sequence Listing Statement; Exhibit A; Refs. 1-3; Petition for Ext. of Time; Check - \$490.00 and Return Receipt Post Card.
<b>Remarks</b> The Commissioner is authorized to charge fee deficiencies or credit overpayments associated with this submission only to the NIXON PEABODY LLP Deposit Account No. 50-0850.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	NIXON PEABODY LLP, 100 Summer Street, Boston, MA 02110-2131		
Signature			
Printed name	David S. Resnick/Leena H. Karttunen		
Date	11/8/2004	Reg. No.	34,235/37 C.F.R. Sec.10.9(b)

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